PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

SEP 13 2007

or <u>Fax</u> (571)-273-2885

ppropriate. All further	correspondence includir ed below or directed oth	ig the Patent, advance of	rders and notification of r	naintenance fees will be	e mailed to the current	correspondence address as trate "FEE ADDRESS" for	
	ENCE ADDRESS (Note: Use BI	, ,	Fee(Note: A certificate of mailing can only be used for domestic mailings of the Fcc(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
PO BOX 747	7590 06/15 ART KOLASCH CH, VA 22040-0747	& BIRCH; LLP	I he Stat addı tran	Certificate of Mailing or Transmission hereby certify that this Fec(s) Transmittal is being deposited with the United ates Postal Service with sufficient postage for first class mail in an envelope dressed to the Mail Stop ISSUE FEE address above, or being facsimile unsmitted to the USPTO (571) 273-2885, on the date indicated below.			
		·				(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR	T NAMED INVENTOR ATTORNEY DOCKET N		CONFIRMATION NO.	
10/517,837 12/15/2004			Seiji Terakura	3629-0107PUS1 1306			
TILE OF INVENTION	I: REMOTE CONTROL	LED MEDICAL INSTRU	UMENT .				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	. \$700	\$300	\$0	\$1000	09/17/2007	
EXAMINER ART UNIT			CLASS-SUBCLASS]			
PEFFLEY, MICHAEL F 3739			606-041000	•			
CFR 1.363). Change of corresp Address form PTO/S	cence address or indication condence address (or Cha B/122) attached. dication (or "Fee Address	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-0 Number is required.	02 or more recent) attach	ncd. Use of a Customer	2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
			THE PATENT (print or ty		identified below their		
recordation as set for	th in 37 CFR 3.11. Com	pletion of this form is NC				propertus blestiled for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 700.00 DA							
	s Corporation			02 FC:15 aka-ski,03Jap&	12.00 D	A	
lease check the appropr	riate assignce category or	categories (will not be p	rinted on the patent):	Individual - 🕰 Corpor	ation or other private gr	oup entity Government	
a. The following fee(s) Issue Fee	•		b. Payment of Fcc(s): (Plea	,		shown above)	
Publication Fee (1) Advance Order -	No small entity discount # of Copics4	permitted)	Payment by credit can The Director is hereby overpayment, to Depo		e required fee(s), any de	eficiency, or credit any in extra copy of this form).	
	atus (from status indicate						
	ns SMALL ENTITY state		b. Applicant is no lon	-		FR 1.27(g)(2). he assignee or other party in	
nterest as shown by the	records of the United Sta	ites Patent and Trademan	k Office.	ne applicant, a registere	d attorney of agent, or t	ne assignee of other party in	
Authorized Signature	:_ <i>!!]]][</i>]	Inst		DateSep	tember 13,200	7	
Typed or printed nan				Registration No			
This collection of inform application. Confider	nation is required by 37 (ntiality is governed by 35 and application form to the	CFR 1.311. The information U.S.C. 122 and 37 CFR	ion is required to obtain or 1.14. This collection is es	retain a benefit by the pritimated to take 12 minu	ublic which is to file (an tes to complete, including the amount of ti	d by the USPTO to process) ng gathering, preparing, and me you require to complete	

summing the completed application form to the USP10. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.